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This information to identify your case:

UNITED STATES BANKRUPTCY CO

Fill in this information to identify your case:		FILED
United States Bankruptcy Court for the:		UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
Central District of Illinois		JUL 2 1 2016
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	JEFFREY P. ALLSTEADT, CLERK Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

30	art 1: Identify Yourself	About Debtor 1:	
1.	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Write the name that is on your government-issued picture	Willie	
	identification (for example,	First name	First name
	your driver's license or	Jamal	
	passport).	Míddle name	Middle name
	Bring your picture	Eiland	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Same-as-above	
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
	en energe en remembre de la companya de la company	e de la companya de	
3.	Only the last 4 digits of	VVV . VV . R 2 . 4 . 7	
	your Social Security	xxx - xx - <u>8</u> <u>2</u> <u>4</u> <u>7</u>	XXX - XX -
	number or federal	OR	OR
	Individual Taxpayer Identification number	9 xx - xx	0
	(ITIN)	TOTAL COSTS MANAGEMENT AND ADMINISTRATION OF THE PARTY OF	9 xx - xx

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Debtor 1	Willie C				Case number (# known)		
	der met er en						
		About Debtor 1:			About Debtor 2 (Spouse Only in a Joint Case	∌) :	
4. Any business names and Employer Identification Number (EIN) you have used it		I have not used any	business names (or EINs.	☐ I have not used any business names or EINs		
the la	st 8 years trade names and	Business name		-	Business name	·····	
doing business as names		Business name			Business name		
		EIN			EIN		
		EIN	Production of the second second		EIN		
5. Where	you live	en terretari en entre en entre en	e alternativente et en		If Debtor 2 lives at a different address:		
		3907 Butterfield Ro	ad	1000000	Number Street		
		Bellwood	11	60104			
		City	IL State	ZIP Code	City State ZIP C	ode	
		Cook County	N. W. C.	· · · · · · · · · · · · · · · · · · ·	County		
		If your mailing address above, fill It in here. Not any notices to you at this	e that the court wi	the one ill send	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number Street	·		Number Street		
		P.O. Box	**************************************		P.O. Box		
		City	State	ZIP Code	City State ZIP Co	ode	
. Why yo this dis	u are choosing trict to file for	Check one:			Check one:	**	
bankru	ptcy	Over the last 180 days I have lived in this distr other district.	before filing this prict longer than in	petition, any	Over the last 180 days before filing this petition I have lived in this district longer than in any other district.	٦,	
		I have another reason. (See 28 U.S.C. § 1408	Explain. i.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		
				, , , , , , , , , , , , , , , , , , , ,		**********	

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D	ebtor 1	Willie First Name	J. Middle Name	Eilar Last Nam	<u>nd</u>		Case number (# k	(nown)			
F	art 2:	Tell the Cou	rt About Yo	our Bankru	ptcy Case						
7.		apter of the iptcy Code y	Ch ou for	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
are cho under	osing to file	_	Chapter 7								
				Chapter 11	napter 11						
				Chapter 12	napter 12						
			ū	Chapter 13							
8.	How yo	ou will pay th	<u> </u>	local court if yourself, you submitting you with a pre-proper lined to part Application. I request the By law, a julless than 15 pay the fee	for more details to may pay with your payment or or inted address ay the fee in it for Individuals nat my fee be added to ge may, but is 50% of the officin installments;	s about how you not cash, cashier's con your behalf, you to Pay The Filing waived (You may so not required to, voial poverty line the control of the control	nay pay. Typicall check, or money ur attorney may a u choose this op Fee in Installme request this opt waive your fee, a at applies to you is option, you m	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check stion, sign and attach the ents (Official Form 103A). It ion only if you are filing for Chapter 7, and may do so only if your income is a family size and you are unable to ust fill out the Application to Have the with your petition.			
9.	Have yo	ou filed for ptcy within ti	☑ ne	No							
	last 8 y	8 years?	u ·	Yes. District		When	MM / DD / YYYY	Case number			
				District		When	MM / DD / YYYY				
				District		When					
					***************************************	AAIKSIE	MM / DD / YYYY	Case number			
10.		bankruptcy ending or be		No							
	filed by	a spouse wi	no is U	Yes. Debtor				Relationship to you			
	you, or	g this case v by a busines , or by an ?		District		When	MM / DD / YYYY	Case number, if known			
	williago	•		Debtor				Relationship to you			
								Case number, if known			
1.	Do you residen	rent your ce?		res. Has you	ur landlord obtair ce?	ned an eviction judgi	ment against you a	and do you want to stay in your			
				☐ Yes	Go to line 12. Fill out <i>Initial St</i> bankruptcy petiti		Eviction Judgment	Against You (Form 101A) and file it with			

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Debto	r 1 Willie First Name	J, Middle Nam	e	Eiland Last Name		Case	number (if known)	****************	A	
we are the con-										
Part	S: Report Abou	ıt Any B	usines	ses You Own as a Sc	ole Propriet	or				
0	re you a sole prop f any full- or part-			Go to Part 4. Name and location of b						
	business? A sole proprietorship is a			iname and location of b	usiness					
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		as an ich as		Name of business, if any						
	.C.			Number Street						
sc se	you have more than o ble proprietorship, use eparate sheet and atta	a						····	**************************************	
to	this petition.			City	· · · · · · · · · · · · · · · · · · ·		State	ZIP Code	· · · · · · · · · · · · · · · · · · ·	
				Check the appropriate to	box to describe	e your business	::			
				☐ Health Care Busine	ss (as defined	l in 11 U.S.C. §	101(27A))			
				☐ Single Asset Real E	state (as defir	ned in 11 U.S.C	. § 101(51B))			
				☐ Stockbroker (as def	ined in 11 U.S	S.C. § 101(53A))			
				Commodity Broker ((as defined in	11 U.S.C. § 10	1(6))			
				None of the above						
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?			most red any of th	e filing under Chapter 1: appropriate deadlines. If cent balance sheet, state lese documents do not e	you indicate t ment of opera exist, follow the	hat you are a si itions, cash-flov	mall business v statement, a	debtor, you n nd federal inc	nust attach vour	
	or a definition of small			2 No. I am not filing under Chapter 11.						
	usiness debtor, see U.S.C. § 101(51D).		■ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.							
			Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.							
	And Barant if Van	. 0	. 11	A 15						
ACIE.	253 Report ii 10t	OWN 0	r nave	Any Hazardous Prop	erty or any	Property In	at Needs In	nmediate A	Attention	
	you own or have operty that poses		Ø No							
all	eged to pose a th		Yes.	What is the hazard?						
	imminent and entifiable hazard t	0								
pu	blic health or safe	-								-
	do you own any operty that needs			15						
	mediate attention	-		If immediate attention i	s needed, why	y is it needed? _	*************************************			-
per tha	r example, do you ow rishable goods, or live It must be fed, or a bu t needs urgent repair	stock Iilding			30 TO THE TOTAL THE STANLE			**************************************	. , , , , , , , , , , , , , , , , , , ,	•••
				Where is the property?	Number	Street				-
										-
					City			State	ZIP Code	-

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Debtor	1

Willie
5 111110
Fust Name

J.

Eiland Last Name

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

i am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability of

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	Willie J	Eiland	Case number (#k	nown)				
Part 6:	Answer These Que	estions for Reporting Purp	oses					
	kind of debts do	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
you have?		No. Go to line 16b. Yes. Go to line 17.	, , , , , , , , , , , , , , , , , , , ,	accinota parpose.				
		16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
		No. Go to line 16c. Yes. Go to line 17.						
		16c. State the type of debts y	you owe that are not consumer debts or bu	siness debts.				
	e de de la companya			THE DAY OF THE PARTY OF THE PAR				
17. Are ye Chapt	ou filing under ter 7?	☐ No. I am not filing under	Chapter 7. Go to line 18.					
	ou estimate that after xempt property is	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	ded and histrative expenses	No						
are pa availa	nid that funds will be ble for distribution secured creditors?	Yes						
18. How n	many creditors do estimate that you	2 1-49	1,000-5,000	25,001-50,000				
you es		50-99	5,001-10,000	50,001-100,000				
OWE	N. W. 1111.11	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000				
19. How n	nuch do you	2 \$0-\$50,000	□ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion				
estima be wo	ate your assets to	\$50,001-\$100,000	□ \$10,000,001-\$50 million	\$1,000,000,001-\$10 billion				
DC 110	1 (1)	□ \$100,001-\$500,000 □ \$500,001-\$1 million	\$50,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion				
			□ \$100,000,001-\$500 million	☐ More than \$50 billion				
0. How n estima	nuch do you ite your liabilities	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion				
to be?		\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion				
		\$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion				
Part 7:	Sign Below		— \$100,000,001*\$000 trimitoff	More than \$50 billion				
or you		I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and				
		If I have chosen to file under C of title 11, United States Code. under Chapter 7.	Chapter 7, I am aware that I may proceed, it . I understand the relief available under eac	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed				
		If no attorney represents me at this document, I have obtained	nd I did not pay or agree to pay someone vid and read the notice required by 11 U.S.C.	who is not an attorney to help me fill out § 342(b).				
		I request relief in accordance v	with the chapter of title 11, United States Co	ode, specified in this petition.				
		I understand making a false sta with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519,	atement, concealing property, or obtaining sult in fines up to \$250,000, or imprisonmer and 3571.	money or property by fraud in connection of the for up to 20 years, or both.				
		* Wille Es	lad x_					
		Signature of Debtor 1	Signature	of Debtor 2				
		Executed on 07/3	20/6 Executed	on				

	Case 10-	-23300		cument	Page 7 of 50				
Debtor 1	Willie First Name	J. Middle Name	Eiland Last Name		Case number (# known)	·			
For you bankrup attorney	if you are fili tcy without a	ng this In	should understa	nd that many	ridual, to represent yourself in bankruptcy court, but you y people find it extremely difficult to represent				
•	e represente:	d bv	themselves succ consequences, y	essfully. Bed ou are stron	cause bankruptcy has long-term financial and legal igly urged to hire a qualified attorney.				
an attorney, you do not need to file this page.			To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.						
			court. Even if you p in your schedules. I property or properly also deny you a dis- case, such as destr cases are randomly	lan to pay a pa f you do not lis r claim it as ex charge of all y oying or hiding r audited to de	d debts in the schedules that you are required to file with the articular debt outside of your bankruptcy, you must list that debt st a debt, the debt may not be discharged. If you do not list empt, you may not be able to keep the property. The judge can our debts if you do something dishonest in your bankruptcy g property, falsifying records, or lying. Individual bankruptcy termine if debtors have been accurate, truthful, and complete.				
			hired an attorney. T successful, you mus	he court will no st be familiar v ure, and the lo	orney, the court expects you to follow the rules as if you had ot treat you differently because you are filing for yourself. To be with the United States Bankruptcy Code, the Federal Rules of cal rules of the court in which your case is filed. You must also on laws that apply.				
			Are you aware that consequences?	filing for bankr	uptcy is a serious action with long-term financial and legal				
			☐ No ☑ Yes						
			Are you aware that inaccurate or incomp No Yayes	oankruptcy fra olete, you cou	ud is a serious crime and that if your bankruptcy forms are ld be fined or imprisoned?				
			☐ No ☐ Yes. Name of Pen	_{son} Tania St	one who is not an attorney to help you fill out your bankruptcy for oxstell Preparer's Notice, Declaration, and Signature (Official Form 119).	ms?			
			have read and under	rstood this not	at I understand the risks involved in filing without an attorney. I ice, and I am aware that filing a bankruptcy case without an rights or property if I do not properly handle the case.				
		X	: Wille	00	l x				

Signature of Debtor 1

Date

Contact phone

67-13-2016 MM/DD /YYYY

Signature of Debtor 2

MM / DD / YYYY

Date

Contact phone

Cell phone

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Debtor 1	Willie	J.	Eiland	
	First Name	Middle Name	Last Name	
Debtor 2	_			
Spouse, if filin	g) First Name	Middle Name	Last Name	
Inited State	s Bankruptcy Court fo	r the: Northern District of	Illinois	

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

your original forms, you must fill out a new Summary and check the box at the top of this page.	ieu schedules after you file
Part 1: Summarize Your Assets	
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$10,200.00
Part 2: Summarize Your Liabilities	
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 6,580.00 + \$ 2,922.00
Part3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,607.00
Copy your monthly expenses from line 22c of Schedule J	\$2,688.00

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De	ebtor 1	Willie First Name	Middle Name	J. Last Nam	Eiland	Case number (if known)	
P	art 4:	Answer The	ese Questio	ns for Adm	inistrative and Statistic	al Records	
6.	Are yo	u filing for bar	nkruptcy und	er Chapters	7, 11, or 13?		
	No. View	You have noth	ning to report o	on this part of	the form. Check this box and	I submit this form to the court with you	r other schedules.
7.	What ki	nd of debt do	you have?				
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
	☐ You		ot primarily co	onsumer deb	ots. You have nothing to reno	rt on this part of the form. Check this t	oox and submit
8.	From th Form 12	e Statement o	of Your Curre OR, Form 122	nt Monthly In B Line 11; O F	ncome: Copy your total curre R, Form 122C-1 Line 14.	nt monthly income from Official	\$5,272.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total ci	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,580.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	0.00
9g. Total. Add lines 9a through 9f.	\$	6,580.00

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			age 10 cr cc		•
Fillint	his information to	identify your case and th	is filing:		
Debtor 1	Willie	J.	Eiland		
Debtor 2	First Name	Middle Name	Last Name		
	If filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Cou	rt for the: Northern District o	f Illinois		
Case nu	mber				
········				Į	Check if this is ar
Offic	cial Form 10	06A/B			amended filing
Scl	hedule A	VB: Propert	У		12/15
respon	ry where you trink sible for supplying our name and case	cit his best. Be as compling correct information. If me number (if known). Ansi	s. List an asset only once. If an asset fits in more ete and accurate as possible. If two married peo- lore space is needed, attach a separate sheet to wer every question. Land, or Other Real Estate You Own or He	ole are filing together, be this form. On the top of	oth are equally
Ø N		y legal or equitable intere	st in any residence, building, land, or similar pro		
· · · · ·	es. where is the pr	operty?	What is the property? Check all that apply.		
			☐ Single-family home	Do not deduct secured cl the amount of any secure	ed claims on Schedule D:
1.1.	Street address, if av	ailable, or other description	Duplex or multi-unit building	Creditors Who Have Clai	ms Secured by Property.
			☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
			☐ Land	s 0.00	e 0.00
			Investment property	— ———————————————————————————————————	4
	City	State ZIP Code	☐ Timeshare ☐ Other	Describe the nature of interest (such as fee	simple, tenancy by
			Who has an interest in the property? Check one	the entireties, or a lif	e estate), if known.
			Debtor 1 only		
	County		Debtor 2 only		
			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			At least one of the debtors and another Other information you wish to add about this	,	
			property identification number:	tem, such as local	
lf you	own or have more	than one, list here:			
			What is the property? Check all that apply. Single-family home	Do not deduct secured cla	ims or exemptions. Put
1.2.		ilable, or other description	Duplex or multi-unit building	the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
	Street address, if ava	ilable, or other description	Condominium or cooperative	Current value of the	
			☐ Manufactured or mobile home	entire property?	Current value of the portion you own?
			Land	\$0.00	\$0.00
			☐ Investment property ☐ Timeshare	Describe the nature of	f vour oursership
	City	State ZIP Code	Timeshare Other	interest (such as fee the entireties, or a life	simple, tenancy by
			Who has an interest in the property? Check one.		
			Debtor 1 only		
	County		Debtor 2 only	_	
			☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is con (see instructions)	mmunity property

property identification number:

Other information you wish to add about this item, such as local

Debto	***************************************	J. J. ddle Name Last N	Filed 07/21/16 Entered 07/21/16 Document Page 11 of 50 Case number		Desc		
	, not (tailed ly)	uote Marite Cast M	eme				
1.	3. Street address, if availa	ble, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	the amount Creditors W	of any secur Tho Have Cla alue of the	ed claims of the claims of the claims Securion Current	cemptions. Put on Schedule D: ed by Property. nt value of the n you own?
	**** *********************************		Manufactured or mobile home	erkiie bio	0.00	portio	0.00 00 00 00 00 00 00 00 00 00 00 00 00
	City	State ZIP Coo	Investment property	interest (s the entiret	the nature	simple.	···
	County		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this is property identification number:	Check (see ins	if this is co structions)	ommunit	y property
2. Add you	i the dollar value of the have attached for Part	portion you own for 1. Write that number	all of your entries from Part 1, including any entri	es for nages		\$	0.00
Part 2	Describe Your	Vahiolos					
you ow	own, lease, or have lead that someone else drives, vans, trucks, tractors	gal or equitable intel es. If you lease a veh	rest in any vehicles, whether they are registered or icle, also report it on Schedule G: Executory Contracts es, motorcycles	not? Include a and Unexpired	any vehicles d Leases.	s	
Do you you own 3. Cars	n own, lease, or have lead that someone else drives, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage:	gal or equitable intel es. If you lease a veh	cle, also report it on Schedule G: Executory Contracts	Do not deduct the amount of Creditors Who	t secured cla f any secure o Have Clain ue of the	aims or exe d claims or ns Secured Current	Schedule D:
Do you you own	own, lease, or have lead that someone else drives, vans, trucks, tractors No Yes Make: Model: Year:	gal or equitable interes. If you lease a vehicles, sport utility vehicles. Chevy Express 2002	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct the amount of Creditors Who Current valentire proper	t secured cla f any secure o Have Clain ue of the	aims or exe d claims or ns Secured Current	Schedule D: by Property.
Do you you own 3. Cars	n own, lease, or have lead that someone else drives, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage:	gal or equitable interes. If you lease a vehicles, sport utility vehicles. Chevy Express 2002 190,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct the amount of Creditors Who Current valentire proper	t secured cla f any secure o Have Clain ue of the erty?	aims or exe d claims or ns Secured Current	Schedule D: I by Property. value of the you own?
Do you you own 3. Cars	own, lease, or have lead that someone else drives, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage: Other information:	gal or equitable interes. If you lease a vehicles, sport utility vehicles. Chevy Express 2002 190,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct the amount of Creditors Who Current valentire proper	t secured claif any secured clair erty? 500.00	aims or exed claims or exed portion \$	Schedule D: lby Property. value of the you own? 2,500.00 Inptions. Put Schedule D:

3.3. Make: Model: Year: Approximate Other informa	V							
Other informa	V		Debtor 1 only Debtor 2 only Debtor 1 and Deb		the amount Creditors W	ict secured cliof any secure the Have Claim	ed claims on ms Secured Current	Schedule D. by Property. value of the
t ame i Matemania an ancienta in amegara.	ation;		☐ Check if this is	debtors and another community property (see	entire pro	0.00	\$	you own? 0.0
3.4. Make: Model:			Debtor 1 only	it in the property? Check one.	the amount	ct secured cla of any secure ho Have Clair	d claims on	Schedule D.
Year: Approximate			Debtor 2 only Debtor 1 and Deb At least one of the			lue of the	Current	value of ti /ou own?
Other informa	ation:		Check if this is instructions)	community property (see	\$	0.00	\$	0.0
A Maka					ories			
4.1. Make: Model:			Debtor 1 only	in the property? Check one.	Do not deducthe amount o	at secured cla of any secured	d claims on 3	Schedule D:
***************************************				or 2 only	Do not deducthe amount o	of any secured to Have Claim	d claims on 3 ns Secured b	Schedule D: by Property.
Model:			Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the	or 2 only	Do not deducthe amount of Creditors With	of any secured to Have Claim	d claims on 3 ns Secured b Current v	Schedule D: by Property.
Model: Year: Other informa	tion:	here:	Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is of instructions)	or 2 only debtors and another ommunity property (see	Do not deducthe amount of Creditors With	of any secured to Have Claim due of the derty?	d claims on 3 ns Secured b Current v	Schedule D: by Property. value of th ou own?
Model: Year: Other informa If you own or have m	tion:	here:	Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this is of instructions)	or 2 only debtors and another ommunity property (see in the property? Check one.	Do not deduct the amount of Creditors With Current value entire prop	of any secured of the erty? 0.00 t secured clair any secured or Have Claim ue of the	d claims on Sas Secured E Current v portion y \$	ou own? O.OC ptions. Put ichedule D: y Property. value of the ou own?

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Debtor 1

Willie

Document Eiland

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Case number (if known)_

Part 3: **Describe Your Personal and Household Items**

D	o you own or have any legal or equitable interest in any of the following items?	Current val portion you Do not deduct or exemptions	own? t secured claims
6.	Household goods and furnishings	or exemplions	٠,
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No		
	Yes. Describe Household Furniture	•	300.00
	The state of the s	\$	300.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	2 Yes. Describe Cell Phone and TV		
	Cell Phone and TV	\$	200.00
8,	Collectibles of value	*	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No		
	☐ Yes. Describe	· · ·	0.00
		\$	0.00
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	☑ No ☐ Yes. Describe	1	
	Tes. Describe	\$	0.00
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	☑ No	***	
	Yes. Describe		0.00
	Al-ul		
11,	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No		
	Yes, Describe Clothing For Me		200.00
	Clothing For Me	\$	200.00
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	2 No		
	Yes. Describe	\$	0.00
13	Non-farm animals		
	Examples: Dogs, cats, birds, horses		
	☑ No ☐ Yes. Describe	\$	0.00
14.	Any other personal and household items you did not already list, including any health aids you did not list		
	No		
	☑ Yes. Give specific		
	information.	\$	0.00
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$	700.00
1	for Part 3. Write that number here	1	

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Debtor 1

Document Eiland Willie

Case number (if known)_

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шы	te L	e e	- 25

Describe Your Financial Assets

Do you own or have any	legal or equitable interest in	any of the following?	1,000	Current value portion you on Do not deduct se or exemptions.	vn?
16. Cash <i>Examples</i> : Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file	your petition		
2 No					
Q Yes		Cs	ash:	\$	0.00
17. Deposits of money Examples: Checking, s and other s	savings, or other financial accou imilar institutions. If you have m	ents; certificates of deposit; shares in credit unions, butliple accounts with the same institution, list each.	rokerage houses,		
7 Yes		Institution name:			
	17.1. Checking account:	Chase Bank		\$	0.00
	17.2. Checking account:			\$	0.00
	17.3. Savings account:			s	0.00
	17.4. Savings account:			\$	0.00
	17.5. Certificates of deposit:			\$	0.00
	17.6. Other financial account:			\$	0.00
	17.7. Other financial account:			\$	0.00
	17.8. Other financial account:			\$	0.00
	17.9. Other financial account:			\$	0.00
	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts			
	***************************************			\$	0.00
			2-35-2-17-19-00-00-00-00-00-00-00-00-00-00-00-00-00	\$	0.00
				\$	0.00
19. Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, including a	an interest in		
Yes. Give specific		09		\$	0.00
information about them		09		\$	0.00
		09	% %	\$	0.00

Debtor 1	Case 16	-23380 Doc J.	1 Filed 07/21/16 Document Eiland	Page 15 of 50	Desc Main	,
Negoti	iable instruments	include personal che	her negotiable and non-neg cks, cashiers' checks, promis annot transfer to someone by	ssory notes, and money orders.		
	s. Give specific ormation about	Issuer name:				0.00
the	m				_ \$	0.00
		************			- \$	0.00
Ø No □ Ye		RA, ERISA, Keogh, 4 Type of account:	l01(k), 403(b), thrift savings a	occounts, or other pension or profit-sharing pla	ns	
		401(k) or similar plan:			\$	0.00
		Pension plan:				0.00
		IRA:	***************************************		_ \$	0.00
		Retirement account:			\$	0.00
		Keogh:			\$	0.00
		Additional account:			\$	0.00
		Additional account:			_ \$	0.00
Your st <i>Examp</i>	ty deposits and phare of all unused oles: Agreements on nies, or others	deposits you have r	nade so that you may continu id rent, public utilities (electric	ne service or use from a company c, gas, water), telecommunications		
☑ No						
☐ Yes	s	łn	stitution name or individual:			
		Electric:			· \$	0.00
		Gas:			\$	0.00
		Heating oil:			\$	0.00
		Security deposit on re	ntal unit:	With the second	\$	0.00
		Prepaid rent:			\$	0.00
		Telephone:			\$	0.00
		Water:			\$	0.00
		Rented furniture:			. •	0.00

Other:

of years)	
\$	0.0
\$	0.0
<u> </u>	0.0
	sssss

0.00

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Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation,

Social Security benefits; unpaid loans you made to someone else

2 No

30. Other amounts someone owes you

0.00

0.00

Property settlement:

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☐ Yes, Describe......

Z No

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

0.00

0.00

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☐ Yes.....

0.00

Document Page 19 of 50 Willie Debtor 1 Case number (if known) First Nam 48. Crops-either growing or harvested **Ø** No Yes. Give specific 0.00 information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Mo No ☐ Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed ☐ Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list Z No ☐ Yes. Give specific 0.00 information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7a Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **1** No 0.00 Yes. Give specific 0.00 information..... 0.00 0.00 54 Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 0.00 55. Part 1: Total real estate, line 2 9,500.00 56. Part 2: Total vehicles, line 5 700.00 57. Part 3: Total personal and household items, line 15 0.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 10,200.00 Copy personal property total 10,200.00 62. Total personal property. Add lines 56 through 61. 10,200.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

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Filed 07/21/16

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Fil	l in this in	formation to i	lentify your case:			
De	btor 1	Willie	J.	Eiland		
	btor 2	First Name	Middle Name	Lest Name		
	ouse, if filing)		Middle Name	Last Name		
		Bankruptcy Court	for the: Northern Distri	ct of Illinois		7
	se number known)					Check if this is ar amended filing
						_
Of	ficial F	orm 106	С			
S	ched	ule C:	The Prop	erty You	Claim as Exemp	12/15
Usin spac	g the prop e is neede	erty you listed o	on Schedule A/B: Prop ttach to this page as r	perty (Official Form 106	ogether, both are equally responsible for A/B) as your source, list the property that difficult and Page as necessary. On the top	it you claim as exempt. If more
spec of au retire limit	cific dollar ny applica ement fun s the exer	amount as ex ble statutory l ds—may be u nption to a pa	empt. Alternatively, imit. Some exemptic nlimited in dollar am	you may claim the ful ins—such as those for ount. However, if you nt and the value of the	amount of the exemption you claim. On the property being the property being the property being the property being the property of the property is determined to exceed the property being the property is determined to exceed the property being the proper	ng exempted up to the amount benefits, and tax-exempt narket value under a law that
Pa	rti 1: lo	lentify the P	roperty You Claim	as Exempt		
	You a	re claiming stat re claiming fede	e and federal nonbani eral exemptions. 11 U	kruptcy exemptions. 11 .S.C. § 522(b)(2)		
Æ.,	Brief des	, , ,	property and line on	Current value of the portion you own	pt, fill in the information below. Amount of the exemption you claim	Specific laws that allow exemption
				Copy the value from Schedule A/B	Check only one box for each exemption	
	Brief	. House	hold	\$ 300.00	2 1	735 ILCS 5/12-1001(b)
	descriptio Line from Schedule	···.		*	100% of fair market value, up to any applicable statutory limit	
	Brief descriptio	n: <u>Clothi</u> i	<u>1g</u>	\$200.00	2 \$ 200.00	735 ILCS 5/12-1001(a)
	Line from Schedule	A/B: 11			☐ 100% of fair market value, up to any applicable statutory limit	
	Brief descriptio	n: <u>Electro</u>	onics	\$ <u>200.00</u>	2 \$ 200.00	735 ILCS 5/12-1001(b)
	Line from Schedule				☐ 100% of fair market value, up to any applicable statutory limit	MMEMORALANA
	(Subject to	adjustment or id you acquire	4/01/16 and every 3		es filed on or after the date of adjustmen	t.)

Yes

Document

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Debtor 1

Eiland

Case number (if known)_

Part 2: **Additional Page**

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Auto	\$ 2,500.00	□ \$ ✓ 100% of fair market value, up to	735 ILCS 5/12-1001(c)
Line from Schedule A/B:	3.1		any applicable statutory limit	
Brief description:	Auto	\$7,000.00		735 ILCS 5/12-1001(c)
Line from Schedule A/B:	3.2		√ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value statutory limit √ 100% of fair marke	
Brief description:	Checking Acct	\$0.00	Ø s 0.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	<u>17.1</u>		100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	D s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	***************************************	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:	And Andrewson Control of the Control		any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s □ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:	***************************************	\$	D \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:	PRINCIPAL PRINCI		☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this in	nformation to identify y	our casi	e:								
Debtor 1	Willie	J.		Eiland							
Debtor 2	First Name	Middle Na	ame	Last Name							
(Spouse, if filing)	First Name	Middle Na	ame	Last Name							
United States	Bankruptcy Court for the: N	lorthern I	District of Illinois								
Case number										Check	if this is an
		****************		······································]						ed filing
Official	Form 106D										
		: A	- 1MFE - BB		· · · · · · · · · · · · · · · · · · ·			NA.			
	ule D: Cred					-	a proposition of the second		*********	Ne belle investe and search physics principles	12/15
information.	lete and accurate as po If more space is neede ages, write your name :	ed, copy	the Additional	Page, fill it out.	together, bot number the	th are ed entries,	qually i and at	responsible f tach it to this	or sup form.	plying correc On the top of	t any
				•							
	editors have claims sec eck this box and submit				dules. You ha	ave nothi	na else	to report on t	his for	m.	
	III in all of the information			•					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Part 1: Li	st All Secured Claim	16									
<u> </u>			*******				Colum	n A	Colun	nn B	Column C
for each cla	cured claims. If a credito aim. If more than one cr	editor ha	is a particular cla	im, list the other	creditors in P	art 2.	Amou	nt of claim	Value	of collateral	Unsecured
As much a	s possible, list the claims	s in alpha	abetical order acc	cording to the cre	ditor's name.			deduct the of collateral.	claim	supports this	portion If any
	ARK CREDIT UNIC	N	Describe the pr	operty that secur	res the claim:		\$	4,600.00	\$	4,600.00	\$0.00
Creditor's Nat 2775 S.	me Moorland Rd		2008 Suzuki	Blvd	**************************************	halfach officials a beautiful annual					
Number	Street					r					
***************************************			As of the date y	ou file, the claim	is: Check all ti	hat apply.					
New Be		3151 Code	Unliquidated								
•	ne debt? Check one	Code	Disputed								
Debtor 1			_	heck all that apply. t you made (such a		nnurod					
Debtor 2	only		car loan)			securea					
	and Debtor 2 only ne of the debtors and anothe	er		(such as tax lien, m i from a lawsuit	nechanic's tien)						
	this claim relates to a	.		ng a right to offset)			_				
commun	ity debt	4.4				_					
2 2	as incurred <u>03/01/20</u>			account number				0.540.00		0.540.00	
Persona Creditor's Nam	al Finance Company	<u>/</u>	Describe the pro	operty that secur	es the claim:		\$	2,549.00	\$	2,549.00	0.00
***************************************	Cass Avenue										
Number	Street	i.	As of the date ve	ou file, the claim	is: Check all th	ust sontv					
1.8.4			☐ Contingent	ou mo, are emin	io. Officor diff to	iai appiy.					
Westmo	nt IL 60 State ZIP (559 Code	Unliquidated Disputed								
Who owes th	ne debt? Check one.		Nature of lien. C	heck all that apoly							
Debtor 1 c			_	you made (such as	s mortgage or s	ecured					
Debtor 2 o	only and Debtor 2 only		car loan)	(such as tax tien, m	achanic's lian\						
	and Deptor 2 only ne of the debtors and anothe		Judgment lien		condino 3 scil)						
☐ Check if	this claim relates to a		Other (including	ng a right to offset) _							
commun		14	l oot A dinka -f -	ccount number_	8 2 4	7					
	ollar value of your entr						S	7 149 00			

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					Do	Cument	r age z	3 01 30					
	Fill in t	inis in	formation to identify	your case									
			Willie	1		Files							
	Debtor :	1.	First Name	J . Middie Name	 	Eiland Lest Name		Park Company					
	Debtor 2		***************************************	~~~~				or to analyze the state of the					
	(Spouse,	if filing)	First Name	Middle Name		Last Name		No.					
-	United 9	States E	Bankruptcy Court for the:	Northern Distri	ict of Illino	ois							
1	Case nu	ımber										ck if this is	an
L_	(If known	ì) 	·				····				ante	nded filing	
~	\ffici	ial E	Form 106E/F										
				W.O. 4			_						
2	ich	eal	ile E/F: Cre	ditors	Who	Have U	Insec	ured C	lain	15		12/15	
В	e as co	mple	te and accurate as po	ssible. Use P	art 1 for o	creditors with P	RIORITY c	aims and Pa	art 2 for	creditors with I	NONPRIORIT	Y claims.	es:
_	st the	other	party to any executor	y contracts o	r unexpii	red leases that	could resul	t in a claim.	Also lis	st executory co	ntracts on S	chedule	
			(Official Form 106A/E partially secured clair										
ne	eded,	сору	the Part you need, fill	it out, numb	er the en	tries in the box							f
ar	ny addi	itional 	l pages, write your na	me and case	number ((if known).							
P	art 1:	Lis	st All of Your PRIO	RITY Unsec	ured Cla	aims							
4	Dο a	nv cre	ditors have priority u	nsecured cla	ime anai	nst vou?				ilmin taxtariariariariariarianiariarianiariani			
••	*****	•	to Part 2.	nacounce ore	inia agaii	inde your							
	Ø Y												
2.	List	all of	your priority unsecur	ed claims. If a	creditor l	has more than o	ne priority u	nsecured clai	im, list th	e creditor separ	ately for each	claim. For	
	each	claim riority	listed, identify what typ amounts. As much as i	e of claim it is nossible list th	. If a clain se claims i	n has both priorit in ainhabetical o	ty and nonpi order accord	riority amount ing to the cre	ts, list the ditor's na	at claim here and ame. If you have	d show both p more than tw	oriority and vo priority	
			claims, fill out the Cont										
	(For a	an exp	planation of each type o	of claim, see th	ie instruct	ions for this form	n in the instr	uction bookle	et.)				
										Total claim	Priority amount	Nonprior amount	ity
2.1													~~
	<u></u> <u></u>		I Revenue Service		Last	4 digits of acco	ount number	8 2 4	7	s2,533.00	\$_2,533.01] \$0	00
		•	ment Of The Treas	sury	Whe	en was the debt i	incurred?	04/01/20	<u>1</u> 5				
	Num	ber	Street										
	En	esno	CA	93888	— Asc	of the date you fi	ile, the claim	is: Check all	that apply	-			
	City	Carro	State	ZIP Code		Contingent							
			rred the debt? Check or	ne.		Unliquidated Disputed							
		Debtor				•							
		Debtor	· 2 only · 1 and Debtor 2 only			e of PRIORITY		claim:					
			t one of the debtors and a	nother		Domestic support of Taxes and certain	-	ni owe the cov	emment				
		Check	cif this claim is for a co	mmunity debt		Claims for death or	_	-					
	is ti	he clai	im subject to offset?			intoxicated	, porterior	.,,	***				
	Ø	No				Other. Specify							
	_, D	Yes											
2.2	1 2111		Department of Rev	<u>/enue</u>	Last	t 4 digits of acco	ount number	8 2 4	7	\$ 1,047.00	\$_1,047.00	0 \$0	.00
	FRO	iny Cred	HOLS IVEING		Whe	en was the debt i	incurred?	04/01/20	<u>15</u>				
	Num	ber	Street		 Ae r	of the date you fi	ile, the clain	is: Check all	that apply	<u>.</u>			
		- cin of	field IL	62726		Contingent	,						
	City	oringf	State	ZIP Code		Unliquidated							
	Wh	o incu	rred the debt? Check or	ie.		Disputed							
	· · · · · ·		1 only		Typ	e of PRIORITY	unsecured	claim:					
			2 only		Ö	Domestic support	obligations						
			1 and Debtor 2 only at one of the debtors and a	nother		Taxes and certain							
			c if this claim is for a co			Claims for death or intoxicated	r personal inju	iry while you w	ere				
			im subject to offset?	•		other. Specify			w 				
	Ø	No	weeks and an allowant										
		Yes											

Debtor 1

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Your PRIORITY	Unsecured Claim	s - Continuation	Page

2	1	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonp amou	riority Int
~ 111	Priority Creditor's Name	Last 4 digits of account number 8 2 4 7	s_3,000.00	\$ <u>3,000.@</u>	\$	0.00
	509 S. Sixth Street	When was the debt incurred? 02/01/2013				
	Number Street					
	Springfield IL 62701	As of the date you file, the claim is: Check all that apply Contingent	1.			
	City State ZIP Code	Unliquidated				
		☐ Disputed				
	Who incurred the debt? Check one.					
	Debtor 1 only	Type of PRIORITY unsecured claim:				
	Debtor 2 only	☑ Domestic support obligations				
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government				
	☐ At least one of the debtors and another	Claims for death or personal injury white you were				
	☐ Check if this claim is for a community debt	intoxicated Other. Specify				
	Is the claim subject to offset?	The state of the s				
	No No					
	Yes					
		en e				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$	
	The state of the s					
	Number Street	When was the debt incurred?				
		As of the date you file the electricity of the state				
		As of the date you file, the claim is: Check all that apply.				
		Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				
	anna.	T				
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations				
	At least one of the debtors and another	Taxes and certain other debts you owe the government				
		Claims for death or personal injury while you were				
	Check if this claim is for a community debt	intoxicated				
	•	Other. Specify				
	Is the claim subject to offset?					
	O No					
	☐ Yes					
	Priority Creditor's Name	Last 4 digits of account number	\$ \$		B	
	Thomas Orocaco a Marine					
	Number Street	When was the debt incurred?				
		An of the date you tile the state to be a way.				
		As of the date you file, the claim is: Check all that apply.				
		Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:				
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations				
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Taxes and certain other debts you owe the government				
		Claims for death or personal injury while you were				
	Check if this claim is for a community debt	intoxicated		** *** * * * * * * * * * * * * * * * * *		
		Other. Specify				
	s the claim subject to offset?					
-	ls the claim subject to offset? □ No □ Yes					

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Page 25 of 50 Document Eiland Debtor 1 Case number (if known) Part 2 List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ■ No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured daims fill out the Continuation Page of Part 2. Total claim SPRINGLEAF FINANCIAL SERVI Last 4 digits of account number 2 9 6 3 968.00 Nonpriority Creditor's Name 08/23/2014 When was the debt incurred? 601 NW 2nd St, Branch 3683 Number Street Evansville IN 47708 As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Other Specify Collections Account Mo No Q Yes 478.00 3 Last 4 digits of account number CAPITAL ONE 03/05/2015 When was the debt incurred? Nonpriority Creditor's Name P.O. Box 30281 Number As of the date you file, the claim is: Check all that apply. UT 84130 Salt Lake City ZIP Code State Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Collections Account M No Q Yes Last 4 digits of account number __1 _4 _0 _7 **FINGERHUT/WEBBANK** 101.00 Nonpriority Creditor's Name When was the debt incurred? 6250 Ridgewood Rd. Street 56303 MN Saint Cloud As of the date you file, the claim is: Check all that apply. State Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:

☑ No

Yes

At least one of the debtors and another

is the claim subject to offset?

Check if this claim is for a community debt

Student loans

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other Specify <u>Collections Account</u>

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Debtor 1

Willie

Eiland

Case number (if known)_

	Sid.
Part 2	- 1
	- 3

iter listing any entries	on this page, number the	n beginning with	a 4.4, followed by 4.5, and so forth.	To	tal claim
FIRST PREMIEI Nonpriority Creditor's Name			Last 4 digits of account number 6 3 9 1	\$	213.0
3820 N. Louise /			When was the debt incurred? 05/11/2010		
Number Street Sioux Falls	SD	57107	As of the date you file, the claim is: Check all that apply.		
City Who incurred the de	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the c	=		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that		
Check if this clain is the claim subject to No Yes	n is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account		
MACYS/DSNB			Last 4 digits of account number 7 8 2 5	\$	409.0
Nonpriority Creditor's Name P.O. Box 8218	>		When was the debt incurred? 10/11/2013		
Number Street	ОН	45040	As of the date you file, the claim is: Check all that apply.		
Mason City Who incurred the de	State	ZIP Code	Contingent Unliquidated Disputed		
Debtor 1 only Debtor 2 only Debtor 1 and Debto			Type of NONPRIORITY unsecured claim: Student loans		
Is the claim subject	m is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Specify Collections Account 		
O Yes				S	0.0
Equifax Bankruj	otcy Depatment		Last 4 digits of account number 8 2 4 7	Ψ	J
Nonpriority Creditor's Nam P.O. Box 74024			When was the debt incurred? 01/01/2012		
Number Street Atlanta	GA	30374	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent Unliquidated		
Who incurred the de	ebt? Check one.		Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debt At least one of the			 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Check if this cla	im is for a community debt to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account		
M No D Yes	w where				

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Debtor 1

Willie

Eiland

Case number (if known)_

r listing any entries on this pa	age, number the	n beginning with	4.4, followed by 4.5, and so forth.	Total clai
Illinois Tollway			Last 4 digits of account number 8 2 4 7	s <u>753</u>
Nonpriority Creditor's Name			When was the debt incurred? 02/01/2014	
2700 Ogden Avenue Number Street			As of the date you file, the claim is: Check all that apply.	
Downers Grove	****	60515 ZIP Code	Continuent	
City	State	ZIP Code	Unliquidated	
Who incurred the debt? Check	one.		☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other Specify Fine and Fees	
Ø No				
☐ Yes				
			_	
Experian Bankruptcy De	anariment		Last 4 digits of account number 8 2 4 7	s <u> </u>
Nonpriority Creditor's Name	sparument		When was the debt incurred? 02/04/2014	
P.O. Box 2002			When was the debt incurred?	
Number Street		75040	As of the date you file, the claim is: Check all that apply.	
Allen	TX State	75013 ZIP Code	Contingent	
City	Glore	211 0025	☐ Unliquidated	
Who incurred the debt? Check	cone.		☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only			<u></u>	
Debtor 1 and Debtor 2 only At least one of the debtors an	d another		Student loansObligations arising out of a separation agreement or divorce that	
			you did not report as priority claims	
Check if this claim is for a			Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset	?		Other Specify Collections Account	
Ø No				
☐ Yes				
P. Andrewson			Last 4 digits of account number 8 2 4 7	\$(
TransUnion				
Nonpriority Creditor's Name			When was the debt incurred? 02/01/2014	
P.O. Box 1000 Number Street			As of the date you file, the claim is: Check all that apply.	
Cherster	PA	19022		
City	State	ZIP Code	Contingent	
Who incurred the debt? Chec	sk one.		☐ Unliquidated☐ Disputed	
Who incurred the debt? Clied			·	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors at	nd another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for	a community deb	É	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset			Other. Specify Collections Account	
Mo No				
es no				

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Debtor 1

Document

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Part 48

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	3,000.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	3,580.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	6,580.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ s	2,922.00
	6j. Total. Add lines 6f through 6i.	6j.		2,922.00

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	Willie First Name	BAGA.	J. de Name	Eiland Last Name		
Debtor 2	First Name	Maldo	не нате	rast Maine		
(Spouse If filin			lle Name	Last Name		
United State	es Bankruptcy Court fo	or the: Northe	m District of Illinoi	s		
Case numbe (# known)	er					Check if this is a amended filing
Official	Form 1060	3				
Schec	lule G: Ex	cecuto	ory Conti	racts and	Unexpired Leas	es 12/15
1. Do you No. Yes 2. List selexamp	s. Fill in all of the in	ory contract d file this for formation bel	s or unexpired le	eases? ith your other sche ntracts or leases ar	dules. You have nothing else to repo e listed on <i>Schedule A/B: Property (</i> ract or lease. Then state what eac m in the instruction booklet for more	Official Form 106A/B). h contract or lease is for (for
2.4	n or company with	whom you	have the contrac	et or lease	State what the contract of	
Sylvi:	a Eiland				_ Residential Apartment Lea	ase
	Butterfield Roa	ad				
0007	r Street					
Numbe	non	п	60104		···	
	vood	IL State	60104 ZIP Code		nu.	
Numbe Bellw City	vood				and	
Numbe Bellw City	vood					
Numbe Bellw City 2.2 Name						
Numbe Bellw City 2.2 Name		State	ZIP Code			
Numbe Bellw City 2.2 Name Numbe City						
Numbe Bellw City 2.2 Name Numbe City 2.3		State	ZIP Code			
Numbe Bellw City 2.2 Name Numbe City		State	ZIP Code			
Numbe Bellw City 2.2 Name Numbe City 2.3	r Street	State	ZIP Code			
Numbe Bellw City 2.2 Name Numbe City 2.3 Name	r Street	State	ZIP Code			
Numbe Bellw City 2.2 Name Numbe City 2.3 Name City City City City	r Street	State	ZIP Code ZIP Code			
Numbe Bellw City 2.2 Name Numbe City 2.3 Name Numbe	r Street	State	ZIP Code ZIP Code			

ZIP Code

ZIP Code

State

State

City

Name

Number

City

Street

2.5

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Fill in	this i	nformatio	i to identify yo	our case:				
Debto	r 1	Willie		J.	Eiland			
Debto	r 2	First Name		Middie Name	Last Name			
(Spous	e, if filing)) First Name		Middle Name	Last Name			
United	States	Bankruptcy	Court for the: No	orthern District o	f Illinois			
Case r	numbei wn)	·		<u></u>			☐ Check if this is a	n
							amended filing	
Offic	cial	Form	106H					
Sch	ed	ule H	: Your	Codebte	ors	ZAMINOS NA RAMANI MINATONIZZANIZWIZZANIZWI	12/15	
are filir and nu case n	ng tog mber umbe	ether, bot the entries r (if known	n are equally r s in the boxes). Answer eve	esponsible for on the left. Atta ry question.	supplying correct i	nformation. If Page to this p	e as complete and accurate as possible. If two married peop f more space is needed, copy the Additional Page, fill it out, page. On the top of any Additional Pages, write your name at as a codebtor.)	
	No	nave any c	odebtors: (ii)	you are ming u p	onit cooc, co not not	citator opodoc	do a socioliti,	
	Yes							
2. W	ithin t izona.	he last 8 y California.	e <mark>ars, have you</mark> Idaho, Louisia	u l ived in a com na. Nevada. Ne	nmunity property st w Mexico, Puerto Ri	ate or territor co, Texas, Wa	ry? (Community property states and territories include ashington, and Wisconsin.)	
		Go to line 3		,	,			
		-	pouse, former	spouse, or legal	equivalent live with	you at the time	e?	
							FW - the control of the state of the state of	
	' ليا	res. In who	ch community s	state or temtory	dia you live?		Fill in the name and current address of that person.	
		Name of your	spouse, former spor	use, or legal equivale	ent		and-	
		····					_	
		Number	Street					
		City		State		ZIP Code	ones.	
si Si	nown chedu	in line 2 ag le D (Offic	jain as a code ial Form 106D	btor only if that	t person is a guara F(Official Form 106	ntor or cosign	tor if your spouse is filing with you. List the person ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D,	
(Colum	n 1: Your c	odebtor				Column 2: The creditor to whom you owe the debt	
							Check all schedules that apply:	
[3.1]							Schedule D, line	
	Name						☐ Schedule E/F, line	
	Numbe	r Stree	t				☐ Schedule G, line	
	City			Sta	ate	ZIP Code		
3.2							Schedule D, line	
	Name						Schedule E/F, line	
	Numbe	r Stree	(☐ Schedule G, line	
	City			Sta	ale	ZIP Code		
3.3	•						F) Octobrillo D Pro-	
لـــا	Name						Schedule D, line	
	Numbe	r Stree	1	<u> </u>			Schedule G, line	
	City				oto	ZIP Code		

Fill in this information to id	entify your case;					
Debtor 1 Willie	J.	Eiland				
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court fo	or the: Northern District of Illinois					
Case number (if known)				Check if		
			<u></u>		mended filing	
Official Form 106l				incom	plement showing postpene as of the following dat	etition chapter 13 e:
Schedule I: Y	our Income			MM / I	DD / YYYY	
Be as complete and accurate supplying correct information If you are separated and your	as possible. If two married pe n. If you are married and not fil spouse is not filing with you, in the top of any additional pa	do not include i	your spouse is i	iving with	you, include information ;	about your spouse.
Fill in your employment information.		Debtor 1			D. M. C.	
If you have more than one jo	bb.	**************************************	and the second s		Debtor 2 or non-filin	g spouse
attach a separate page with information about additional employers.	Employment status	Employed □ Not employed			☐ Employed ☐ Not employed	
include part-time, seasonal, self-employed work.	or		,		Notemployed	
Occupation may include stude or homemaker, if it applies.	Occupation dent	Truck Drive	<u>r</u>	·		
	Employer's name	Klemm Tanl	k Lines			
	Employer's address	2204 Pampe	orin Bood			
		Number Street			Number Street	***************************************
		ATTERNET OF THE PROPERTY OF TH	and the second s	iran innumanan museli jemente, ada aribum		+PPG NO APPS PHILIPS STATE OF STATE ARE ARE ARE ARE ARE ARE ARE ARE ARE AR
		Green Bay	WI	54313		
		City	State ZIP Co		City Sta	ate ZIP Code
	How long employed then	re? 8 Yrs			8 Yrs	
Part 2: Give Details Ab	out Monthly Income					
Estimate monthly income a spouse unless you are separa	s of the date you file this form	. If you have noth	ning to report for a	any line, wri	ite \$0 in the space. Include	your non-filing
If you or your non-filing spous	se have more than one employer e, attach a separate sheet to thi	r, combine the infi	ormation for all er	mployers fo	r that person on the lines	
			For De	ebtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, deductions). If not paid mont	salary, and commissions (befine), calculate what the monthly	fore all payroll wage would be.	2. \$ 5,2	72.00	with normal a law of the control of	
3. Estimate and list monthly o	overtime pay.		3. +\$	0.00	+ \$	
4. Calculate gross income. Ad	dd line 2 + line 3.		4. \$ 5,2	72.00	\$	

Case 16-23380 Doc 1 Filed 07/21/16 Entered 07/21/16 10:26:31 Desc Main Page 32 of 50 Document Willie Debtor 1 Eiland Case number (if known) First Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 5,272.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 0.00 5a. 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 5d. Required repayments of retirement fund loans 0.00 5d. 5e. Insurance 0.00 5e. 5f. Domestic support obligations 0.00 5f. 5g. Union dues 0.00 5g. 5h. Other deductions. Specify: Misc Descriptions 5h. 2,665.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 2,665.00 6. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 2,607.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.00 8a 8b. Interest and dividends 8b. 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 0.00 8c 8d. Unemployment compensation 0.00 8d. 8e. Social Security 8e 0.008f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: n/a 8f. 0.00 8g. Pension or retirement income 8g 0.008h. Other monthly income. Specify: n/a 8h. 0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 2,607.00 2,607.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: n/a 0.00 11. 🛧

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

2,607.00 12. Combined

monthly income

13. Do you	expect an increase or decrease within the year after you file this form?
M No	The state of the state of the state state of the state of

404	NO.	
	Yes. Explain:	

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Fill	in this i	nformation to identify	/ your case:						
Deb	otor 1	Willie	J. E	iland					
Deh	otor 2	First Name	Middle Name (Last Name		Check if	this is:		
	use, if filing	First Name	Middle Name į	Last Name		☐ An an			
Unit	ed States	Bankruptcy Court for the:	Northern District of Illinois			☐ A sup exper	plemen ises as	t showing post of the following	petition chapter 13
	e number nown)						DD / YYY		9 4445
-		Form 106J	~						
3 C	neo	iule J: Yo	ur Expenses	è					12/15
mon	nation, i	te and accurate as po f more space is need swer every question	ossible. If two married peop ed, attach another sheet to	le are fili this form	ing together, i n. On the top o	both are equally of any additional	respons pages,	sible for supply write your nam	ing correct e and case number
Part	1;	Describe Your Hou	sehold						
1. is ti	his a joi	nt case?							
	No. Go Yes. Do		eparate household?						
		No							
		Yes. Debtor 2 must file	e Official Form 106J-2, Expen	ses for S	eparate House	ehold of Debtor 2.			
2. Do	you hav	e dependents?	□ No		Donondantin				_
	not list D otor 2.	ebtor 1 and	Yes. Fill out this informa each dependent		Debtor 1 or D	relationship to ebtor 2	RONCH.	Dependent's age	Does dependent live with you?
Do i nam		the dependents'			Girl			12	□ No ☑ Yes
					Воу	····	<u> </u>	9	□ No
									☑ Yes
						· · · · · · · · · · · · · · · · · · ·			U No □ Yes
									□ No
						······································			Yes
									□ No
_					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			***************************************	Yes
expe	enses of	enses include people other than your dependents?	☑ No ☐ Yes						
Part 2	Est	imate Your Ongoir	ng Monthly Expenses						
Estima	te your	expenses as of your	bankruptcy filing date unles	s you ar	e using this f	orm as a supple:	ment in	a Chapter 13 ca	se to report
expens applica	ses as or able date	a date after the bank	ruptcy is filed. If this is a su	uppleme	ntal Schedule	J, check the bo	x at the	top of the form	and fill in the
include such a	expens ssistanc	es paid for with non- e and have included	cash government assistand it on Schedule I: Your Incom	e if you	know the valu	ie of		Va	
			penses for your residence.			•	,	Your expen	SOS overamentalistischer son sin sin sin sin sin sin sin sin sin si
any	rent for	the ground or lot.	periodo for your residerice.	arouge I	rormondage l	oayments and	4.	\$	950.00
		led in line 4:							
4a.		state taxes	nanda tanun				4a.	\$	0.00
4b.		y, homeowner's, or rei					4b.	\$	0.00
4c, 4d.		naintenance, repair, ar	•				4c.	\$	0.00
40.	HOHEO	wner's association or o	condominium dues				4d.	\$	0.00

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Debtor 1 Willie J. Eiland Case number (if known)______

			Your ex	penses				
5	Additional mortgage payments for your residence, such as home equity loans	5 .	\$	0.00				
	. Utilities:	-						
	6a. Electricity, heat, natural gas	6a.	\$	200.00				
	6b. Water, sewer, garbage collection	6b.	Φ	0.00				
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$					
	6d. Other, Specify: n/a	6d.	\$	0.00				
7	Food and housekeeping supplies	7.	\$	300.00				
8	Childcare and children's education costs	8.	e	0.00				
9.	Clothing, laundry, and dry cleaning	9.	¢	100.00				
10.	Personal care products and services	10.	φ	100.00				
11.	Medical and dental expenses	11.	\$	0.00				
12.	Transportation. Include gas, maintenance, bus or train fare.	7 1.	Ψ					
	Do not include car payments.	12.	\$	300.00				
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00				
14.	Charitable contributions and religious donations	14.	\$	0.00				
15.	Insurance.							
	Do not include insurance deducted from your pay or included in lines 4 or 20.							
	15a. Life insurance	15a.	\$	0.00				
	15b. Health insurance	15b.	\$	0.00				
	15c. Vehicle insurance	15c.	\$	80.00				
	15d. Other insurance. Specify: Auto	15d.	\$	60.00				
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a	16.	\$	0.00				
17.	Installment or lease payments:							
	17a. Car payments for Vehicle 1	17a.	\$	228.00				
	17b. Car payments for Vehicle 2	17b.	\$	0.00				
	17c. Other. Specify: n/a	17c.	\$	0.00				
	17d. Other. Specify: n/a	17d.	\$	0.00				
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from	174.	Ψ					
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00				
19.	Other payments you make to support others who do not live with you.							
	Specify: n/a	19.	\$	0.00				
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.							
	20a. Mortgages on other property	20a.	\$	0.00				
	20b. Real estate taxes	20b.	\$					
	20c. Property, homeowner's, or renter's insurance	20c.	\$					
	20d. Maintenance, repair, and upkeep expenses	20d.	\$					
	20e. Homeowner's association or condominium dues	20e.	\$	0.00				

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Debtor	1 Willie First Name	Middle Name	J. Last Name	Eiland	Case na	umber (# known)	- Alutonia	
21. Ot	her. Specify: <u>Chi</u>	ld Support D	isbursement	Unit	-	21.	+\$	270.00
22. Ca	iculate your mont	hly expenses.						
228	a. Add lines 4 throu	igh 21.				22a.	\$	2,688.00
22t	o. Copy line 22 (mo	onthly expenses	for Debtor 2), if	any, from Official Form 1	106J-2	22b.	\$	0.00
220	c. Add line 22a and	22b. The resul	t is your monthly	expenses.		22c.	\$	2,688.00
23. Calc	ulate your month	ly net income.						
23a.	Copy line 12 (yo	ur combined me	onthly income) fro	om Schedule I.		23a,	\$	2,607.00
23b.	Copy your month	nly expenses fro	m line 22c abov	e.		23b.	\$	2,688.00
23 c.	Subtract your mo The result is you	onthly expenses r monthly net in	from your month	nly income.		23c .	\$	-81.00
24. Do y	ou expect an incr	ease or decrea	ıse in your expe	enses within the year a	fter you file this fo	orm?		
Fore	example, do you ex	pect to finish pa	lying for your car	r loan within the year or o	do vou expect vour			

or your mortgage?

M No.

☐ Yes. Explain here: Case 16-23380 Doc 1 Filed 07/21/16 Entered 07/21/16 10:26:31 Desc Main Document Page 36 of 50

Fill in this in	nformation to ide	ntify your case:			
Debtor 1	Willie	J.	Eiland		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing		Middle Name	Last Name		
Case number		rthe: Northern District of Ill	linois		
(if known)					Check if this is an
					amended filing
Officia	l Form 106	3Dec			
Decl	aration	About an I	ndividual [ebtor's Schedules	12/15
If two mar	ried people are fi	ling together, both are ed	qually responsible for su	pplying correct information.	
years, or t	ooth. 18 U.S.C. §§	152, 1341, 1519, and 357	71.	can result in fines up to \$250,000, or impriso	onment for up to 20
₩ Yes	Name of person_	Tania Stoxstell		Attach Bankruptcy Petition Preparer's Notice, Deck	aration, and
that the	penalty of perjury by are true and co	y, I declare that I have rea prrect.	ad the summary and schools	edules filed with this declaration and	
Date C	07 /3 201 M/ DD / YYYY	4	Date		

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FIII i	n this in	formation to id	entify your case:				
Debt	or 1	Willie First Name	J. Middle Name	Eiland Last Name			
Debte (Spou	or 2 ise, if filing)	First Name	Middle Name	Last Name			
Unite	d States I	Bankruptcy Court f	or the: Northern District of	Illinois			
Case (If kno	number own)			· · · · · · · · · · · · · · · · · · ·			Oncor in and is an
<u> </u>							amended filing
Offi	cial F	orm 107					
***************************************			_ nancial Affai	rs for Indiv	iduals Filing for l	Bankruntov	12/15
Be as inform	comple nation. I er (if kno	te and accurate f more space is own). Answer e	as possible. If two marr	ied people are filin ate sheet to this fo	g together, both are equally res m. On the top of any additional	ponsible for supplyin	a correct
		our current mai	rital status?				
	☐ Marrie ☑ Not m						
Z	No Yes. L		es you lived anywhere				Dates Debtor 2 lived there
					Same as Debtor 1		☐ Same as Debtor 1
	Num	ber Street		From		745 L	From
	riusi.	ber Street		To	Number Street		То
				•			
	City		State ZIP Code		City SI	ate ZIP Code	
				•	Same as Debtor 1		Same as Debtor 1
	Num	ber Street		From	Number Street		From
				То			То
	City		State ZIP Code		City St	ate ZIP Code	
Sta	ithin the ates and No	last 8 years, d territories includ	id you ever live with a sp le Arizona, Califomia, Idah	ouse or legal equiv no, Louisiana, Nevad	valent in a community property : la, New Mexico, Puerto Rico, Texa	state or territory? (Co as, Washington, and W	mmunity property /isconsin.)
		ake sure you fill	out Schedule H: Your Cod	debtors (Official Forr	n 106H).		

Part	24 Exp	lain the Sour	ces of Your Income				

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Debtor	1 Willie First Name	J. Middle Name Last	Eiland Name	Case no	imber (if known)	
r	ili in the total amount	of income you receive	d from all jobs and all busi	nesses, including part-ti	r or the two previous cal me activities.	endar years?
	you are filing a joint. No	case and you have inco	ome that you receive toget	ther, list it only once und	er Debtor 1.	
Į2:	Yes. Fill in the deta	ails.	Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of the date you filed	of current year until I for bankruptcy:	Wages, commissions, bonuses, tips	\$45,698.00	Wages, commissions, bonuses, tips	\$
	For last calendar	. voar	Operating a business Wages, commissions.		Operating a business Wages, commissions,	
	(January 1 to Dec	•	bonuses, tips Operating a business	\$ 27,862.00	bonuses, tips Operating a business	
	For the calendar	year before that:	Wages, commissions, bonuses, tips	40.000.00	Wages, commissions, bonuses, tips	
	(January 1 to Dec	ember 31, <u>2015</u>)	Operating a business	\$19,223.00	Operating a business	\$
ur ga Lis	nemployment, and other windling and lottery wind the source and the No	ner public benefit paym nnings. If you are filing ne gross income from e	ents: pensions; rental inco	me; interest; dividends; income that you receive	ony; child support; Social money collected from laws ad together, list it only once you listed in line 4.	suits: rovalties: and
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of the date you filed	or our toric your distin				Y
	·					Ψ
	For last calendar	-				
	(January 1 to Dece	ember 31, <u>2014</u>) -				
	For the calendar	year before that:	\$	i		\$
	(January 1 to Dece	ember 31, <u>2015</u>)				\$s

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Debtor 1	Willie First Name Middle Name	J.	Eiland	Case	number (if known)	PROPERTY.
	с соглавно миже мале	Last Name				
Part 3:	List Certain Paymer	uts You Made Befo	re You Filed	i for Rankruntev		
		NO FOR INEGO DOIO	TO TOUT HOU	ior bankruptcy		
e Araoi	thas Dahtas 1's as Dahta	. Do dobto neimorite e		4 ~3		
	ther Debtor 1's or Debtor					
₩ No	"incurred by an individu	al primarily for a perso	nal, family, or l	nousehold purpose."	re defined in 11 U.S.C. § 10	1(8) as
	During the 90 days before	re you filed for bankru	ptcy, did you p	ay any creditor a total o	f \$6,225* or more?	
	No. Go to line 7.					
	total amount yo	ou paid that creditor. D	o not include p	\$6,225* or more in one ayments for domestic s nents to an attorney for	or more payments and the upport obligations, such as this banknutry case	
					after the date of adjustment.	
2 21 ye	s. Debtor 1 or Debtor 2 o	s hoth have nrimarily	consumar da	hte	·	
	During the 90 days before				\$600 or more?	
	☑ No. Go to line 7.	•			,,,,,	
	creditor. Do no	t include payments for	domestic supr	\$600 or more and the to ort obligations, such as ey for this bankruptcy ca	otal amount you paid that child support and se.	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
				\$	\$	☐ Mortgage
	Creditor's Name			+		Car
	Number Street					Credit card
	(edition Orber					Loan repayment
		······				Suppliers or vendors
	City	State ZIP Code				Other
	Ony	State ZIF COGE				
				\$	\$, ,
	Creditor's Name			Ψ	Ψ	Mortgage
						Car
	Number Street					Credit card
						Loan repayment Suppliers or vendors
						Other
	City	State ZIP Code				Coner Coner
				\$	<u>\$</u>	☐ Mortgage
	Creditor's Name					Car
	Number Street					Credit card
	Out of the contract of the con					Loan repayment
		<u></u>				Suppliers or vendors
	City	State ZIP Code				Other
	City	Jaco ∠17 €008				

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btor 1	Willie		J.	Eiland	_	Case number (if known))
	First Name	Middle Name	Last Name		-		
Insid corp ager	<i>ler</i> s include you orations of whic	r relatives; any th you are an of tor a business	general partners ficer, director, pe	; relatives of any rson in control, o	general partners; r owner of 20% or	partnerships of whice more of their voting	who was an insider? ch you are a general partner; gecurities; and any managing r domestic support obligations,
121 1		it and amnory.					
		ments to an insi	der.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name	············			\$	\$	
	Number Street						
	<u> </u>						
	City	S	tate ZIP Code	_	,		
	Insider's Name				\$	\$	
	Number Street						
	H-10-110-110-1			Manufacture of the state of the			
	City	S	ate ZIP Code	_			
an in	sider?		oankruptcy, did		ayments or trans	fer any property o	n account of a debt that benefi
Ø N			.	,			
		nents that bene	fited an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name	HERAVERICA			\$	\$	
	Number Street			***************************************			
			**************************************	p.A.Majorinia of the control of the			
	City	St	ete ZIP Code	****			
	Insider's Name			···	\$	\$	
	Number Street	***************************************		-			
				<u> </u>			
	Ciby	C4	ato 710 Codo	·-			

Willie

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ebtor 1	Willie	J.	Eiland	Case number (# known)	
	First Name Middle I	Name Last Name				
	_					
int 48	Identify Legal A	ctions, Repossessio	ns, and Foreclosu	res		
Withi	n 1 year before you fi	iled for bankruptcy, we	re you a party in any	lawsuit, court action, or admi	nistrative proce	edina?
List a	ll such matters, includi	ng personal injury cases	, small claims actions,	divorces, collection suits, pater	nity actions, sup	port or custody modifica
and c	contract disputes.					
N K	o					
] Y	es. Fill in the details.					
		Natu	re of the case	Court or agency		Status of the cas
(Case title					Pending
				Court Name		On appeal
-						Concluded
				Number Street		Concluded
(Case number	····				
				City State	ZIP Code	
C	Case title			Court Name		Pending
						On appeal
-				Number Street		Concluded
,	Case number					
`	Jage Hallipet			City State	ZIP Code	7170701000
	es. Fill in the informatio		Describe the prop	ertv	Date	Value of the proper
			Dodding the prop	u.v,	Date	value of the proper
						\$
	Creditor's Name				***************************************	
	Number Street		Explain what happ	ened		
			_ ′ •	s repossessed.		
			Property was			
	City	State ZIP Code		s garnisned. s attached, seized, or levied.		
	Oily	State 2.1F CODE				
			Describe the prope	erty	Date	Value of the prope
					***************************************	<u>\$</u>
	Creditor's Name					
	Number Street		Explain what happ	ened		
	74-74-14-14-14-14-14-14-14-14-14-14-14-14-14			repossessed.		
			Property was			
	City	State ZIP Code	Property was			
			Property was	attached, seized, or levied.		

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	Willie	J	Eiland	Case number (if known)		
	First Name Middle Nam	ne Lasi h	Name			
Nithin	90 days before you fil	led for bankrup	ptcy, did any creditor, including a	bank or financial institution,	set off any ar	nounts from you
No		a payment bec	ause you owed a debt?			
	s. Fill in the details.					
			Describe the action the creditor too	·· · · · · · · · · · · · · · · · · · ·	ate action as taken	Amount
Cred	ditor's Name	· · · · · · · · · · · · · · · · · · ·	•			
						\$
Num	nber Street			•		~ <u></u>
		T				
City	St	ate ZIP Code	Last 4 digits of account number: X	XXX		

Vithin :redito	: 1 year before you filed ors. a court-appointed	d for bankrupto receiver, a cus	cy, was any of your property in the stodian, or another official?	possession of an assignee	for the benefi	it of
Z No			reducing of Briother Officials			
Yes						
t 5:	List Certain Gifts a	and Contribut	tions			
	2 years before you file	d for bankrupt	tcy, did you give any gifts with a to	otal value of more than \$600	per person?	
Z No			tcy, did you give any gifts with a to	otal value of more than \$600	per person?	
Z No	2 years before you file		tcy, did you give any gifts with a to	otal value of more than \$600	per person?	
Ž ÍNo ĴYes	s. Fill in the details for ea	ach gift.				Vetue
Ø No ☑ Yes Gil		ach gift.	tcy, did you give any gifts with a to Describe the gifts	D	per person? ates you gave e gifts	Value
Ø No ☑ Yes Gil	s. Fill in the details for ea	ach gift.		D	ates you gave	Value
ZÍ No Zí Yes Gil pe	s. Fill in the details for ea fts with a total value of m er person	ach gift. ore than \$600		D	ates you gave	Valu e \$
ZÍ No Zí Yes Gil pe	s. Fill in the details for ea	ach gift. ore than \$600		D	ates you gave	Value \$
ZÍ No Zí Yes Gil pe	s. Fill in the details for ea fts with a total value of m er person	ach gift. ore than \$600		D	ates you gave	Value \$ \$
No Yes Gill per	s. Fill in the details for eatiffs with a total value of mer person	ach gift. ore than \$600		D	ates you gave	Value \$ \$
ZÍ No Zí Yes Gil pe	s. Fill in the details for eatiffs with a total value of mer person	ach gift. ore than \$600		D	ates you gave	Value \$ \$
No Yes Gill per	s. Fill in the details for eartifts with a total value of mer person	ach gift. ore than \$600		D	ates you gave	Value \$\$
No Yes Gill per Person	s. Fill in the details for eartifts with a total value of metroperson conto Whom You Gave the Gift liber. Street	ach gift. ore than \$600		D	ates you gave	Value \$ \$
No Yes Gill per Person	s. Fill in the details for eartifts with a total value of mer person	ach gift. ore than \$600		D	ates you gave	Value \$\$
No Yes Gill per Person Numb	S. Fill in the details for eartiffs with a total value of mer person on to Whom You Gave the Gift ber Street Ste	ach gift. ore than \$600	Describe the gifts	Dith	ates you gave e gifts	\$\$
No Yes Gift Person Number City	s. Fill in the details for eartifts with a total value of metroperson conto Whom You Gave the Gift liber. Street	ach gift. ore than \$600		D: th	ates you gave	Value \$ \$ Value
No Yes Gift Person Number City	s. Fill in the details for eartiffs with a total value of many person on to Whom You Gave the Gift ber Street States on's relationship to you s with a total value of mon	ach gift. ore than \$600	Describe the gifts	D: th	ates you gave le gifts	\$\$
No Yes Gifts Person Number 1	s. Fill in the details for eartiffs with a total value of many person on to Whom You Gave the Gift ber Street States on's relationship to you s with a total value of mon	ach gift. ore than \$600 ate ZIP Code	Describe the gifts	D: th	ates you gave le gifts	\$\$
No Yes Gifts Person Number 1	s. Fill in the details for eartifts with a total value of mer person on to Whom You Gave the Gift ber Street States on's relationship to you s with a total value of more person	ach gift. ore than \$600 ate ZIP Code	Describe the gifts	D: th	ates you gave le gifts	\$\$
No Yes Gifts Person Number 1	s. Fill in the details for eartifts with a total value of mer person on to Whom You Gave the Gift ber Street States on's relationship to you s with a total value of more person	ach gift. ore than \$600 ate ZIP Code	Describe the gifts	D: th	ates you gave le gifts	\$\$
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Case 16-23380 Doc 1 Filed 07/21/16 Entered 07/21/16 10:26:31 Document Page 43 of 50 Willie Eiland Debtor 1 Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City State ZIP Code Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Mo No ☐ Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7 **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment 001Debtorcc Inc. transfer was Person Who Was Paid made 372 Summit Number Street 06/27/2016 14.95 Jersey City NJ 07306

State

www.001debtorcc.com
Email or website address

Person Who Made the Payment, if Not You

ZIP Code

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		Middle Name	J.	Eiland	Case number (if kno	-wn)	
	First Name	Middle Name	Last	Name			
				Description and value of any proper	rty transferred	Date payment or transfer was made	Amount of payment
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	tstoxstell@yah			ev.			
	Email or website addre	SS					
	Person Who Made the	Payment, if h	lot You				
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	res. riii iii (ne deta	us.		Description and value of any proper	ty transferred	transfer was	Amount of payn
	Person Who Was Paid	······································				made	
	Number Street	**************************************					\$
	Number Street						•
							\$ \$
With	City	State you filed	ZIP Code for bankrup	tcy, did you sell, trade, or otherwis	se transfer any propei		\$
Inclu Do n	City In 2 years before sferred in the ord ide both outright tra not include gifts and	you filed inary cou ansfers and transfers	for bankrup rse of your l	tcy, did you sell, trade, or otherwis ousiness or financial affairs? nade as security (such as the granting re already listed on this statement.		rty to anyone, other tha	\$n property
Inclu Do n	City In 2 years before sferred in the ord ide both outright tra iot include gifts and	you filed inary cou ansfers and transfers	for bankrup rse of your l	ousiness or financial affairs? nade as security (such as the granting	g of a security interest o	rty to anyone, other that or mortgage on your prop	\$n property perty).
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trans Inclu Do n Sol N	City In 2 years before sferred in the ord ide both outright tra iot include gifts and No Yes. Fill in the deta	you filed inary cou ansfers an d transfers ils.	for bankrup rse of your l	pusiness or financial affairs? nade as security (such as the granting a lineady listed on this statement. Description and value of property	g of a security interest of the security inter	rty to anyone, other that or mortgage on your prop	\$
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. Withi						
Withi						
			, did you transfer any prope	rty to a self-settled tru	st or similar device of v	vhich you
	beneficiary? (These are off	ien called <i>asset-p</i>	protection devices.)			
2 21 N	o es. Fill in the details.					
<u>-</u>	es. rill in the details.					
		De	escription and value of the prop	erty transferred		Date transfe
						was made
N	ame of trust					<u></u>
Marie .	and a decision of the second and the	POPMETORE V PARTICULAR PARTICIPA PAR				
rt 8:	List Certain Financial	Accounts, In:	struments, Sefe Deposit	Boxes, and Storag	e Units	
Withi			ere any financial accounts			hanafit
	d, sold, moved, or transfer		ere any financial accounts (or instruments neia in	your name, or for your	benefit,
Inclu	de checking, savings, mon	ey market, or ot	ther financial accounts; cert	ificates of deposit; sh	ares in banks, credit un	ions,
		ds, cooperatives	s, associations, and other fi	nancial institutions.		
Ø N □ v	o es. Fill in the details.					
	es. I ill ill the uetalis.	•		.	<u>.</u> .	
		La	est 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance be closing or trans
Î	lame of Financial Institution	x	xxx	☐ Checking		\$
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Ñ	lame of Financial Institution		«хх- <u> </u>	Checking Savings	***************************************	\$ <u>.</u>
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	First Name	vliddle Name	Last Name	At Workship	Case number (if known)	
Have s	unu storad propo	rhi in a ata-a		-4h4h	outstate to all the second of the second of	
Z No	you stored prope	rty in a Stora	ige unit or place (other than your nome	within 1 year before you filed for bankrup	tcy?
	s. Fill in the deta	ils.				
			Who el	se has or had access to i	t? Describe the contents	Do you stii
						have it?
;	Nome of Steam Total					□ No
,	Name of Storage Facil	ŧy	Name			☐ Yes
i	Number Street		Number	Street	To the second se	
-						
			City Stat	e ZIP Code		
3	City	State Zif	Code			
art 9:	NY 1991			ol for Someone Els		
			ty that someone o	else owns? Include an	y property you borrowed from, are storing	g for,
or no	ld in trust for sor	neone.				
	es. Fill in the deta	iils.				
			Where is	s the property?	Describe the property	Value
č	Owner's Name					\$
_			Number	Straot	Martinia de la companya par	***************************************
ī	Number Street		Number	Street	MANAGE TO A STATE OF THE STATE	***************************************
ī -	Number Street		Number	Street		
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Debtor 1	Willie First Name	Middle Name	J.	Eiland Eiland	Case number (it known)	
25. Hav	ve you notified any	governn	ental unit c	of any release of hazardous n	naterial?	
	No					
السا	Yes. Fill in the de	tails.		Carramanantal costs		
				Governmental unit	Eπvironmental law, if you know it	Date of notice
	Name of site			Governmental unit	***************************************	
	Number Street	· · · · · · · · · · · · · · · · · · ·		Number Street	· · · · · · · · · · · · · · · · · · ·	
	William Committee on the Committee of th			. City State ZIP Co	xde	
	014					
	City	State	ZIP Code			
26. Hav	e you been a party	y in any ju	dicial or ad	lministrative proceeding und	er any environmental law? Include settlemen	ts and orders.
	No					
	Yes. Fill in the det	tails.				
				Court or agency	Nature of the case	Status of the case
	Case title	····		··•		
				Court Name		Pending
		*		Number Street		On appeal
				Number Street		Concluded
	Case number			City State 2	ZIP Code	
Part 1				siness or Connections to		
27. Wit	hin 4 years before	you filed	for bankrup	otcy, did you own a business	or have any of the following connections to	any business?
	A member of a	tor or self limited li	-employed ability com:	in a trade, profession, or oth pany (LLC) or limited liability	er activity, either full-time or part-time	
	A partner in a			pany (CCO) or minied natimy	partnership (ccr)	
	An officer, dire	ector, or n	nanaging ex	ecutive of a corporation		
	An owner of at	least 5%	of the votin	g or equity securities of a co	prporation	
Ø	No. None of the at	oove appl	es. Go to P	art 12.		
	Yes. Check all tha	t apply ab	ove and fill	in the details below for each	business.	
	Business Name			Describe the nature of the bu	siness Employer Identification Do not include Social S	
					EIN:	
	Number Street			Name of accountant or book	keeper Dates business existed	
		***************************************			From To	
	City	State	ZIP Code			
				Describe the nature of the bu	siness Employer Identification Do not include Social S	
	Businesa Name					•
	Number Street					
				Name of accountant or bookle	ceeper Dates business existed	
					From To	
	City	State	ZIP Code			**************************************

Case 16-23380 Doc 1 Filed 07/21/16 Entered 07/21/16 10:26:31 Desc Main Page 48 of 50 Document Eiland Debtor 1 Case number (if known) Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. Business Name Number Street Name of accountant or bookkeeper Dates business existed ____ To ___ City State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. 2 No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City ZIP Code Part 12 Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? Ø No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

✓ Yes. Name of person Tania Stoxstell

 Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Case 16-23380 Doc 1 Filed 07/21/16 Entered 07/21/16 10:26:31 Desc Main Document Page 49 of 50

Fill in this inf	formation to id	entify your case:		
Debtor 1	Willie First Name	J. Middle Name	Eiland Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Łast Name	
United States E	Bankruptcy Court	for the: Northern District of Illinois	S	
Case number (If known)			-	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Pari (H. List Your Creditors Who Have Secured Claims

 For any creditors that you listed in Part 1 of Schedule I information below. 	D: Creditors Who Have Claims Secured by Property (Offici	ial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Landmark Credit Union	☐ Surrender the property.	□ No
name.	Retain the property and redeem it.	☑ Yes
Description of 2008 Suzuki Blvd property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name:	Surrender the property.	☐ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
Ç	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	· □ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	u :es
occaning dopt.	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and redeem in. Retain the property and enter into a Reaffirmation Agreement.	wa res
securing debt.	☐ Retain the property and [explain]:	

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Debtor 1 Willie J. Eiland Case number (If known)______

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases		Will the lease be assumed?	
Lessor's name: Sylvia Eiland		□ No	
Description of leased Resideroperty:	ential Apartment Lease	☑ Yes	
Lessor's name:		□ No	
		☐ Yes	
Description of leased property:			
_essor's name:		□ No	
Description of leased property:		☐ Yes	
.essor's name:			
.cosor a name.		□ No	
Description of leased property:		☐ Yes	
.essor's name:			
		☐ Yes	
Description of leased property:		G Tes	
essor's name:		□ No	
		☐ Yes	
Description of leased property:			
e e e			
essor's name:		□ No	
Name - Change		☐ Yes	
Description of leased property:			
Sign Below			
nder penalty of perjury, I de ersonal property that is sub	clare that I have indicated my intention about any prect to an unexpired lease.	operty of my estate that secures a debt and any	
0,200 00			
www velo	<i>y</i>		
Signature of Debtor 1	Signature of Debtor 2		
Date 07 13 2019	Date		